_	7							/		
<u></u>						Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD										
Effective December 29, 1999								(0)	261	-
CLAIMS AS FILED - PART I						SMA	LL ENTIT	Y	OTHE	R THAN
-	OR		(Column 1) (Column 2) NUMBER FILED NUMBER EXTRA			TYP	E	OR	SMALL	ENTITY
ļ.		INCIVIE	NOMBER FILED NOMBER EXTRA			RAT	E FEE		RATE	FEE
┝	ASIC FEE	200					345.0	O OR		690.00
ŢĊ	OTAL CLAIMS	20	minus 20= •			X\$ 9	=	OR	X\$18=	
<u> </u>	DEPENDENT C		5 minus 3 = 1. 2			X39	=	OR	X78=	154
ML	MULTIPLE DEPENDENT CLAIM PRESENT						=	OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA	L	OR	<u> </u>	846
CLAIMS AS AMENDED - PART II							•		OTHER	RTHAN
(Column 1) (Column 2) (Column 3)						SMAI	LL ENTIT	or_	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI TIONA FEE	AL.	RATE	ADDI- TIONAL FEE
NON	Total	. 20	Minus	. 20	- 0	X\$ 9	=	OR	X\$18=	
AME	Independent	٠ 5	Minus :	5	= 0	X39=	:	OR	X78=	
_	FIRST PHESE	NIATION OF N	OLTIPLE DE	PENDENT CLAIM		+130:			+260=	
						TOT		OR	TOTAL	ļ
		(Online 4)				ADDIT. F		OR	ADDIT. FEE	
_		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)		1.00	-	·	V
MENDMENT B		REMAINING AFTER AMENDMENT		NUMBERPREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI TIONA FEE		RATE	ADDI- TIONAL FEE
N	Total	. 19	Minus	-20	- 0	X\$ 9=	-	OR	X\$18=	
AME	Independent	· 4	Minus	PENDENT CLAIM	-0	X39=		OR	X78=	
	THESE	AHON OP M	OLI IFLE DEI	FENDENI CLAIM		+130=			+260=	
			•			TOT			+200≅ TOTAL	<u> </u>
						ADDIT. F		OR	ADDIT. FEE	
4.5		(Column 1) CLAIMS		(Column 2) HIGHEST.	(Column 3)				,	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
ND	Total	•	Minus	••	=	X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***	=	X39=	+	1		
1	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM				OR	X78=	
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							OR	+260=	<u> </u>
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										

FORM PTO-875 (Rev. 12/99)